

Work Order ID 89116

89116

Page 1

August-21-12 2:31:12 PM

Item ID: D212-664-107TRN

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Turning Detail

Start Date: 8/24/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Run Start *NR1*

Approvals: Process Plan: MLJ

Date: 12/08/12 Tooling:

Date:

QC:

Date: 12/08/12 SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D212-664-147	Rev B(DE0)
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100	MORI SEIKI CNC LATHE LARGE	0.00
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100

Mori Seiki

Memo

0.00

Mori Seiki CNC Lathe Large

1-Fill tube with sand & install plugs DT8534 on both ends as per Folio FA705

2-Turn first side as per Folio FA113

3-Blend transition lines only, **do not sand whole tube**:

FOLIO REV: B

DWG REV: B

*Use mill bastard file, brush file repeatedly with file card.

*Do not use sandpaper coarser than 320 grit.

110

QC1- Inspect dimensions to dimension sheet

0.00

110

QC

Memo

0.00

Quality Control

12/11/07

12/11/07

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

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Page 2

August-21-12 2:31:12 PM

Item ID: D212-664-107TRN

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Turning Detail

Start Date: 8/24/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

120

Mori Seiki

Mori Seiki CNC Lathe Large

MORI SEIKI CNC LATHE LARGE

Memo

1-Turn second side as per Folio FA705

2-Blend transition lines only, **do not sand whole tube**:

*Use mill bastard file, brush file repeatedly with file card.

*Do not use sandpaper coarser than 320 grit.

FOLIO REV: 75

DWG REV: 75

3- Remove plugs and sand

0.00

0.00

0.00

0.00

130

130

QC

Quality Control

QC1- Inspect dimensions to dimension sheet

Memo

1 0

1 0

9mm.L
12/11/08

9mm.L
12/11/08

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 89116

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Page 3

August-21-12 2:31:12 PM

Item ID: D212-664-107TRN

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Turning Detail

Start Date: 8/24/12 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	QC8- Inspect parts - second check	0.00							
140									
QC	Memo	0.00							
Quality Control									
145		0.00							
145									
Crosstubes	Memo	0.00							
Crosstubes	GRIND ONLY TRANSITION LINES SMOOTH LONGITUDE WAY.								
150		0.00							
150									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	1- PRESSURE WASH X-TUBE INSIDE AND OUT								
	2- ACID ETCH X-TUBE INSIDE AND OUT. USE RED SCOTCH BRITE								

JW 12-10-8

RM 12-10-8

RM 12-10-8

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 89116

89116

Page 4

August-21-12 2:31:13 PM

Item ID: D212-664-107TRN

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Crosstube Turning Detail

Start Date: 8/24/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

QC5- Inspect part completeness to step on W/O

0.00

160

QC

Memo

0.00

Quality Control

170

Packaging

0.00

170

Packaging

Memo

0.00

Packaging

Identify and stock in kanban rack

Location: LG

180

QC21- Final Inspection - Work Order Release

0.00

180

QC

Memo

0.00

Quality Control

RM 12-4-12

12/11/13

ME
12-11-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
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FAULT CATEGORY												
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Picklist Print

August-21-12 2:31:12 PM

Page 1

Work Order ID: 89116

Parent Item: D212-664-107TRN

Start Date: 8/24/12

Required Date: 9/14/12

Parent Item Name: Crosstube Turning Detail

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A New Issue 08-03-06 DD Verified by:ec
IPP Rev B Removed polish 08.04.02 EC verified: DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D6019-128 Crosstube Material		Manufactured	No			110	Each	48.0000	1	1			

Location

Loc Qty

Loc Code

LG

48

69803

17

75635

24

79741

7

1 mm-l 12/11/06

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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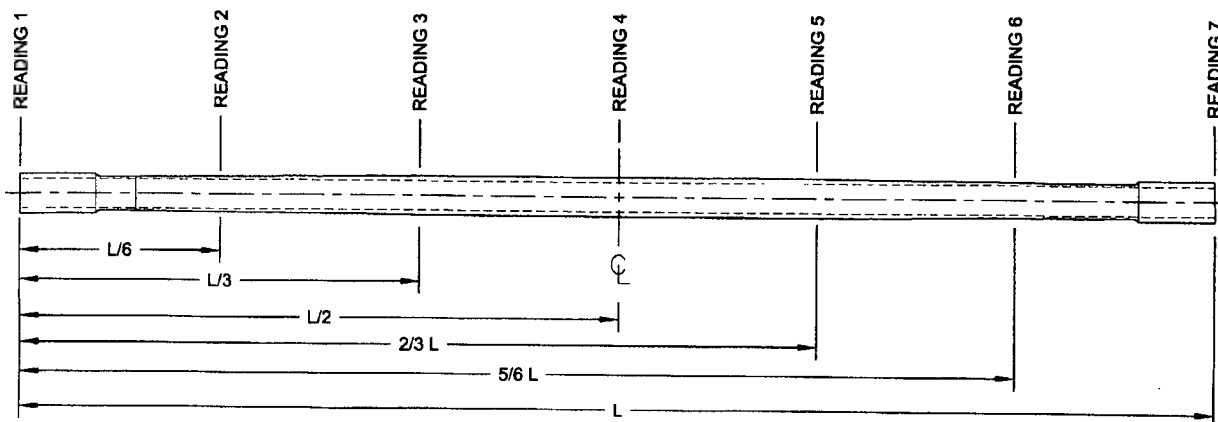
DART AEROSPACE LTD	Work Order:	89116
Description: Crosstube Assembly (205/212/412 Low Fwd)	Part Number:	D212-664-147
Inspection Dwg: D212-664-147 Rev: B		Page 1 of 2

FIRST ARTICLE INSPECTION CHECKLIST

	Inspection Sheet Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
SIDE A	0.313	+/-0.010	313	-		vern	CNC-08
	2.360	+0.005/-0.000	2.362	/		↓	
	2.360	+0.005/-0.000	2.365	-			
	2.366	+0.005/-0.000	2.368	/			
	2.473	+0.005/-0.000	2.478	/			
	2.573	+0.005/-0.000	2.577	-			
	2.673	+0.005/-0.000	2.677	-			
	2.750	+0.005/-0.000	2.750	-			
	2.750	+0.005/-0.000	2.750	/			
SIDE B	0.313	+/-0.010	313	-		vern	CNC-08
	2.360	+0.005/-0.000	2.362	/		↓	
	2.360	+0.005/-0.000	2.363	-			
	2.366	+0.005/-0.000	2.366	/			
	2.473	+0.005/-0.000	2.477	/			
	2.573	+0.005/-0.000	2.578	-			
	2.673	+0.005/-0.000	2.688	-			
	2.750	+0.005/-0.000	2.750	-			
	2.750	+0.005/-0.000	2.750	/			
	0.126.528	+/-0.020	126.510	/		tape	LG-22

DART AEROSPACE LTD	Work Order:	89116
Description: Crosstube Assembly (205/212/412 Low Fwd)	Part Number:	D212-664-147
Inspection Dwg: D212-664-147 Rev: B		Page 2 of 2

WALL THICKNESS MEASUREMENT



Location	WALL THICKNESS MEASUREMENT (IN)				Deviation Δw (max-min)	TOLERANCE
	w1	w2	w3	w4		
READING 1 L = 0"	.131	.132	.125	.125	.007	0.048"
READING 2 L = 14	.130	.132	.136	.127	.005	
READING 3 L = 30	.230	.232	.221	.215	.017	
READING 4 L = 63	.321	.331	.328	.320	.011	
READING 5 L = 30	.216	.237	.235	.217	.021	
READING 6 L = 14	.128	.147	.135	.117	.030	
READING 7 L = CWF	.129	.145	.132	.114	.031	

Calibration Result

Actual Block Thickness: .160 - .250

Sitescan 250 Measured Thickness: .100 - .250

Measured by:	<i>mmk</i>	Audited by:	<i>ju</i>	Prototype Approval:	N/A
Date:	12/11/08	Date:	12-10-8	Date:	N/A
Rev	Date	Change		Revised by	Approved
A	08.11.07	New Issue (P/O D212-664-107)		KJ/EC	
B	10.02.02	Dimension 126.528 was 126.53		KJ	
C	12.06.04	Wall thickness form added		KJ	<i>[Signature]</i>

Item	Qty -147	Qty -147B	Part Number	Description
1	X		D212-664-147	CROSSTUBE ASSEMBLY (205/212/412 LOW FWD)
2		X	D212-664-147B	CROSSTUBE ASSEMBLY (214 LOW FWD)
3	1	1	D6019-128	CROSSTUBE
4	2	2	D2893-1	SUPPORT
5	4	4	D3595-063-450	RUBBER CUSHION
6	2	2	D3659-1	CUFF
7	4	4	MS21920-25	CLAMP (OR MS21920-26)
8	44	44	CR3212-4-06	RIVET (OR M7885/3-4-06)
9	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II CLASS 2 ADHESIVE)
10	A/R	A/R	SIKAFLEX-241/-291	SEALANT (OR PROSEAL 890 OR MIL-S-8802 CLASS B2 SEALANT)

GENERAL NOTES:

- MATERIAL MANUFACTURED FROM D6019-128
FINISHED LENGTH = 126.528±0.020 (BEFORE BENDING/TRIMMING)
- FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4 1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4 2
PAINT OUTSIDE PER DART QSI 005 4 2
- TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- UNITS INCHES UNLESS OTHERWISE NOTED
- BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF
- USING VIBRATING STYLUS
- WEIGHT: D212-664-147 = 24.2 lbs (PER IIN-D212-664)
D212-664-147B = 24.2 lbs (PER IIN-D212-664)
- PART IS SYMMETRIC ABOUT CENTERLINE.
- WHEN MACHINING TAPER, RUN CUTTER OFF PART BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH
- BEND PROGRESSIVELY WITH A MINIMUM OF 8 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D. EXCEPT UP TO 10% IS ALLOWED IN AREA NOTED
- LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038
- INSTALL D2893-1 SUPPORT USING 0.03" TO 0.05" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- INSTALL MS21920-25 CLAMPS (OR -26) WITH D3595-063-450 RUBBER CUSHIONS TO SECURE THE D2893-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- TORQUE CLAMPS 80 TO 100 IN.-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING
- INSTALL D3659-1 CUFF AFTER CHEMICAL CONVERSION COAT BUT BEFORE PAINT, WITH A LAYER OF SIKAFLEX-241/-291 OR PROSEAL 890 OR MIL-S-8802 CLASS B2 SEALANT BETWEEN CUFF AND CROSSTUBE. SEAL EDGE OF CUFF TO ENSURE NO GAPS
- TOUCH-UP HOLES WITH CHEMICAL CONVERSION COAT.

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 TO AMENDMENT
 NOTICE
 ORDER

891116 MJS

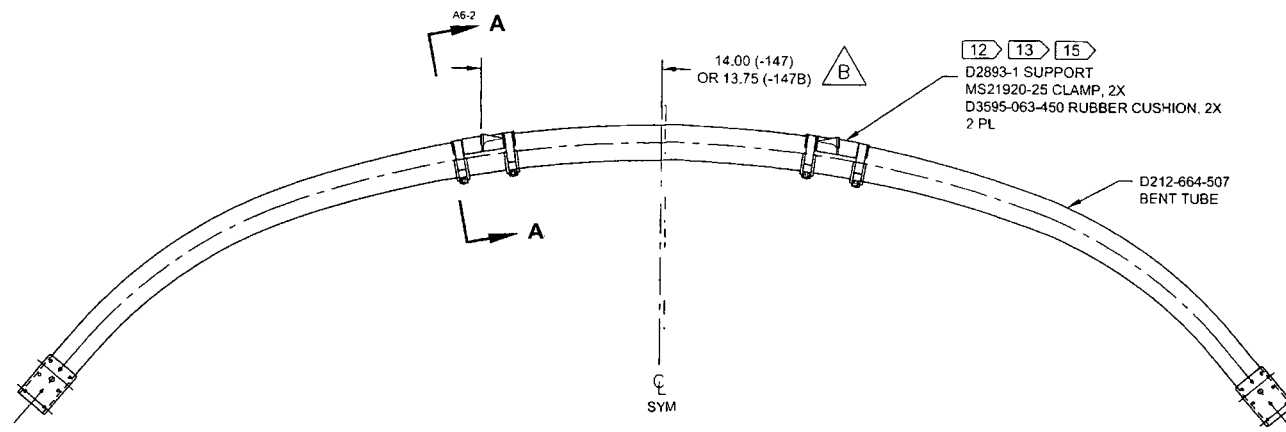
12/08/22

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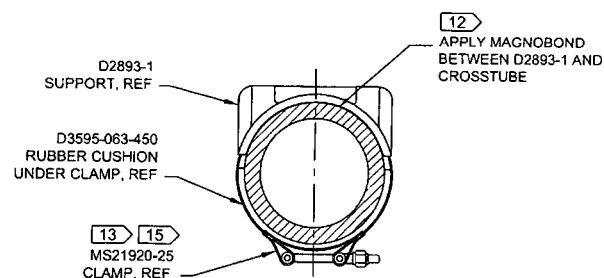
Per ECW#1164
 11/07/20
 UNDER REVIEW

RELEASED
 2009-10-29

B	REVISE GENERAL NOTES/PART LIST; UPDATE TO CURRENT STANDARDS; ADD -147B (ZN C4-2, D4-2)	RF	09.09.30
A	NEW ISSUE	CP	07.07.07
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF	DRAWING NO.	REV. B
CHECKED	RF	D212-664-147	SHEET 1 OF 4
MFG. APPR.	RF	TITLE	SCALE
APPROVED	RF	CROSSTUBE (205/212/412 LOW FWD)	NTS
DE APPR.	RF	COPYRIGHT © 2007 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	
DATE	09.09.30		



**D212-664-147/-147B
ASSEMBLY DETAIL**



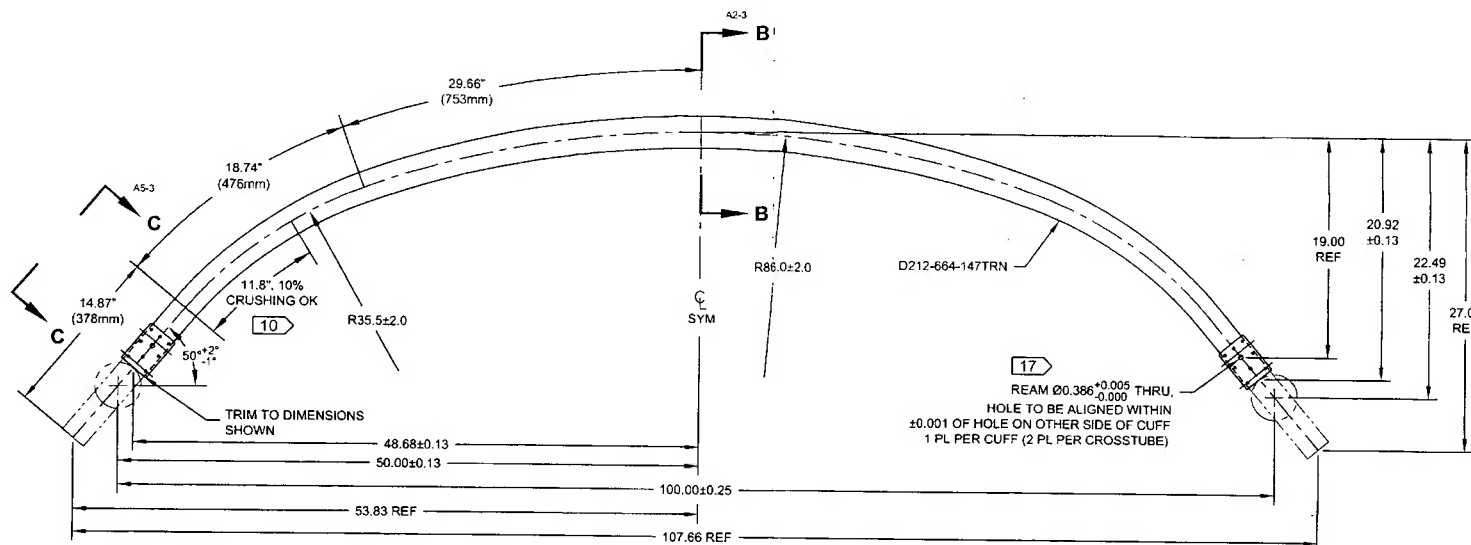
89116

DEO ATTACHED

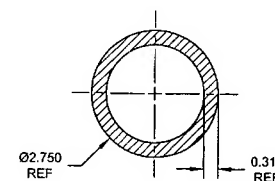
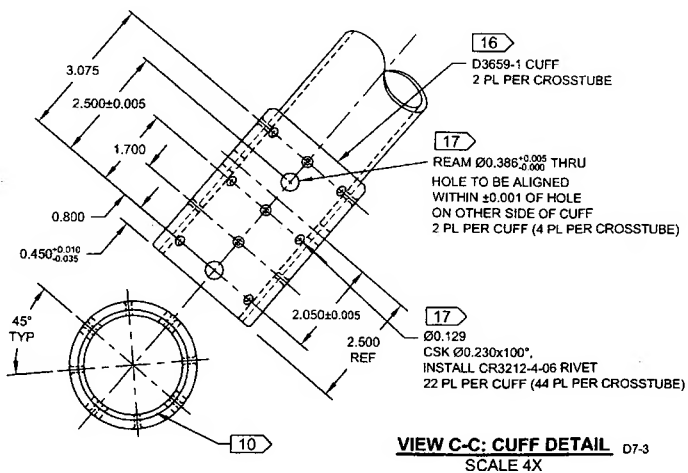
ECU#11-614
21.07.20
UNDER REVIEW
CP 11.06.13

RELEASED
2009-10-29

DESIGN	97	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	97	DRAWING NO.	REV. B
MFG. APPR.	13	D212-664-147	SHEET 2 OF 4
APPROVED	14	TITLE	SCALE
DE APPR.	14	CROSSTUBE (205/212/412 LOW FWD)	NTS
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D212-664-507
BENDING AND DRILLING DETAIL 10 B



SECTION B-B D5-3
 SCALE 4X

LOW FWD - 614
 09.09.30
UNDER REVIEW
09.09.30

RELEASED
 2009-10-29
MD

DESIGN	97	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	98	DRAWING NO.	REV. B
MFG. APPR.	98	D212-664-147	SHEET 3 OF 4
APPROVED	99	TITLE	SCALE
DE APPR.	99	CROSSTUBE (205/212/412 LOW FWD)	NTS
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89116

DEO ATTACHED

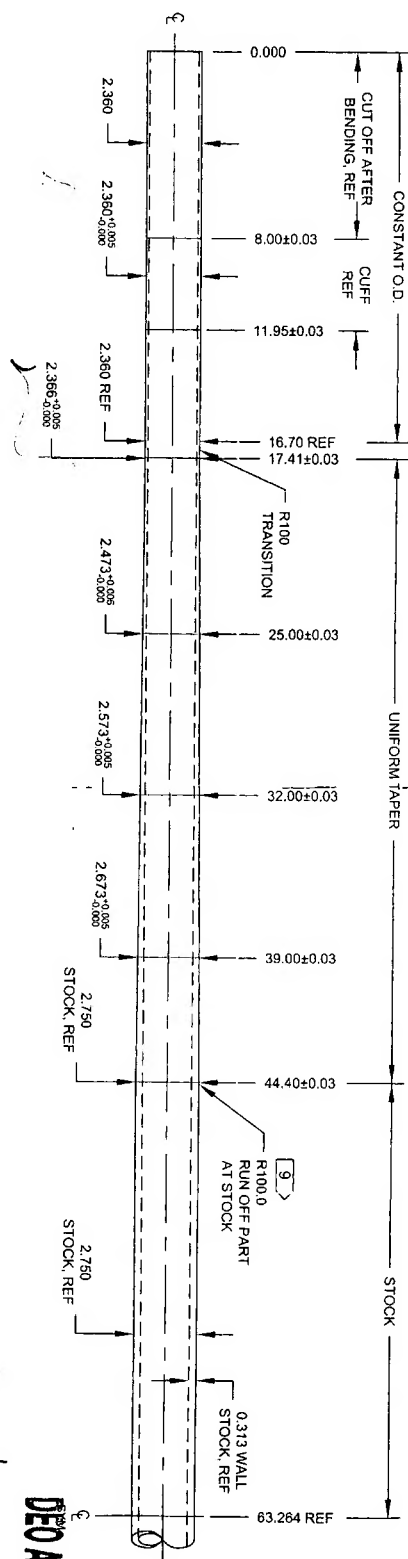
ECR #1-614
11.07.26
UNDER REVIEW
11/08/23

RELEASED
2009-10-29

DESIGN	02	DART AEROSPACE LTD
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA
CHECKED	02	DRAWING NO.
MFG. APPR.	02	D212-664-147
APPROVED	02	REV. B
DE APPR.	02	SHEET 4 OF 4
DATE	09.09.30	TITLE
		CROSSTUBE (205/212/412 LOW FWD)
		SCALE
		NTS

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D212-664-147TRN
TURNING DETAIL



DRAWING NO. D212-664-147	TITLE CROSSTUBE ASS'Y (205 LOW FWD)	REV. B	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D212-664-147-B-1	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN <i>97</i>	CHECKED <i>ASS</i>	MFG. APPR. <i>185</i>	APPROVED <i>WV</i>		DE APPR. <i>WV</i>		
DATE 11.07.15	DATE 11.07.20	DATE 11.07.21	DATE 11/07/21		DATE 11.07.21		

PURPOSE:

REPLACE MAGNOBOND WITH PROSEAL.

CHANGE:

IS:

Item	Qty -147	Qty -147B	Part Number	Description
9	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

9	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
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NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) TO INSTALL D2893-1 SUPPORT: ABRABE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

- 12) INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASED
2011-07-28
WV

